



Kansas Health Policy Overview

Kansas Public Health Association

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History of KHPA

- Established 2005 to *“develop and maintain a coordinated health policy agenda that combines the effective purchasing and administration of health care with promotion oriented public health strategies (KSA 75-7404).”*
- Consolidated management of state health care programs and purchasing



Organization of KHPA

- Medicaid: Joint state-federal health care for low-income elderly, disabled, children and families
 - \$2+ billion per year
 - 327,500 beneficiaries (April 2010)
 - Medical services = KHPA
 - HCBS for mental/physically disabled = SRS
 - Long-term care & Frail Elderly waivers = Aging
 - Children in state custody = Juvenile Justice Authority
- Children's Health Insurance Program (CHIP): Low-cost health insurance for uninsured children ... 40,449 beneficiaries (April 2010)
- State Employee Health Plan – health insurance for state employees and their families; certain local governments
- State Employee Workers Compensation (SSIF)
- Data Policy & Evaluation
 - Kansas Health Indicators
 - Data Analytic Interface



Roles and Responsibilities

- Day-to-Day management of health programs
- Compliance and cost containment
- Policy Recommendations to Legislature and Governor
- Produce annual health reform agenda
- Implement federal health reform
 - SRS
 - Kansas Insurance Department
 - Department on Aging
 - Department of Health and Environment
 - Legislature
 - Governor



Federal Health Reform

- Expansion of Medicaid to 138% FPL – including childless adults
- Extends group-like insurance to all Americans
- Individual mandate
- Employer mandate (100+ employees)
- State-based “exchange” markets
 - Individuals
 - Small businesses



Federal Health Reform

Implications for Kansas

- Number of uninsured reduced by 190,000 (out of 335,000 +/-)
- Most (131,000) transition into Medicaid and CHIP
- Large employers add cost; expand coverage
- Savings for small employers
- Impact on individuals varies
- Net savings to state, 2014-2019; nominal cost afterwards
- State choices determine future costs
 - Reimbursement rates
 - State funding of safety net



Federal Health Reform

Challenges Ahead

- **Detailed review of new federal laws**
- **Work closely with other state agencies**
- **Closely monitor and work with Federal agencies**
- **Coordinate information system changes**
 - New enrollment system and outreach process (“KATCH” grant from HRSA)
 - New insurance exchanges
 - Other assistance programs serving similar populations
- **Work with health care stakeholders to develop cost-control options for policymakers**

*Coordinating health & health care
for a thriving Kansas*



<http://www.khpa.ks.gov/>